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PATENT APPLICATION FEE DETERMINATION RECORD  Substitute for Form PTO-875									Application or Docket Number		
CLAIMS AS FILED – PART I (Column 1) (Column 2)							SMALL E	ENTITY	OR	OTHER THAN SMALL ENTITY	
FOR NUMBER FILED NUMB			R EXTRA -		RATE	FEE		RATE	FEE		
BASIC FEE (37 CFR 1.16(a))						s	OR		s		
TOTAL CLAIMS (37 CFR 1.16(c))  minus 20 =						x \$=		OR	x s=		
INDEPENDENT CLAIMS (37 CFR 1.16(b)) minus 3 = .					x \$ =		OR	x s =			
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))					+ s =		OR	+5 =			
						ı ı			1		
• If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL	L	OR	TOTAL	
	Cl	_AIMS AS AM	ENDED -	- PART II							
	(Column 1) (Column 2) (Column 3)					SMALL ENTITY		OR	OTHER THAN SMALL ENTITY		
A TN	1-1205	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE .	ADDI- TIONAL FEE
ME	Total (37 CFR 1,16(c))		Minus	-20	=		x s =		OR	x s =	
AMENDMENT	Independent (37 CFR 1.16(b))	· <del>/ 为</del>	Minus		=	il	x s =		OR	x \$ =	
₩.		ATION OF MULTIPL	E DEBENDE	NT CLAIM (37 CE	R 1 16(d))				1		
	FIRST PRESENT		·	·	1.10(0)	1 1	+ \$ = TOTAL		OR	+s =	1
	,						ADD'L FEE		OR	ADD'L FEE	<u> </u>
		(Column 1)	· ·	(Column 2) HIGHEST	(Column 3)	1 1			7		1
NTB		CLAIMS . REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATÉ	ADDI- TIONAL FEE
AMENDMENT	Total (37 CFR 1.16(c))	•	Minus	**	=		x s=		OR	x s=	
	Independent (37 CFR 1.16(b))		Minus		=		x s=		OR	x s=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						+ s =		OR	+ s =	
اــــا			·			,	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
ŀ		(Column 1)		(Column 2)	(Column 3)	_			_		
NT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST MUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL - FEE		RATE	ADDi- 1 OHAL PEE
ME	Total (37 CFR 1.16(c))		fámus		=	1	X \$=		OR	), S==	
AMENDMENT	Independent (37 CFR 1.16(b))	· · · · · ·	Minus	•••	=		x s =		OR	x s=	
AME		TATION OF MURTIP	E DEPENDE	NT CLAM 137 CF	R 1 16(d))	1			OR		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1 15(d))						J	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
	* If the "Highest	column 1 is less th Number Previous Number Previousl	v Paid For"	IN THIS SPACE	is less than 20	, ent	er "20".		J 0		

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1,16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1,14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patient and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.